

BEST AVAILABLE COPY

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET							SERIAL NO. 09/773,351	FILING DATE
APPLICANT(S)								
CLAIMS								
	BEFORE		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT			
	IND	DEP	IND	DEP	IND	DEP	IND	DEP
1							81	
2							82	
3							83	
4							84	
5							85	
6							86	
7							87	
8							88	
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47								
48								
49								
50								
TOTAL IND.	4		4				TOTAL IND.	
TOTAL DEP.	15		15				TOTAL DEP.	
TOTAL CLAIMS	19		19				TOTAL CLAIMS	